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A case of multiple myomata
of the uterus + + + + +



A CASE OF MULTIPLE MYOMATA OF THE
UTERUS. ULCERATED VARICOSE VEINS
OF LEFT LEG. HYSTEROMY-
MECTOMY. RECOVERY.*

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K. McB., white, age 49, single, was admitted to the Charity Hospital May 27th, 1895, complaining of pain in the back and lower abdomen and also of varicose veins in the left leg.

The *Family History* has no bearing upon the case.

Personal History. Has always been healthy. Catamenia appeared when she was 15 years of age. They were slight in amount, lasting a day and a half, but were always regular and without pain. There was considerable amount of leucorrhœal discharge at the time of admission to the hospital.

Present Sickness. Has been complaining for the past two years of "bad health," particularly of pain in the small of the back, the left lower abdomen and the left leg from the knee down. For the past two years the pain has been worse about the internal malleolus. At the time of her admission to the hospital a number of ulcerated areas varying in size from a pin point to several centimeters in diameter were observed upon the inner surface of the left leg. The patient explained their presence by saying that she often suffered from intense itching and that as a consequence of scratching blisters would be formed which would afterwards burst, leaving a raw surface. The bowels have been irregular; at times the patient would not have a movement for a week. Micturition frequent; the urine was passed in small quantities and with burning pain.

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At the examination without an anæsthetic, the outlet was found to be intact, the cervix uteri soft and pointing upward; the uterus was forward, movable, very irregular in outline, enlarged, about the size of an adult head. In the cervix a polypus about the size of a hazel-nut could be felt which was at once removed by torsion.

On June 8, I proceeded to operation, being assisted by the resident staff of the hospital and my nurse, Miss Heriot.

Operation. Incision having been made through thick abdominal walls in the median line and the peritoneal cavity having been opened, the uterus, which was found to be practically made up of a mass of myomatous tumors, was delivered from the abdominal cavity. The broad ligaments on either side having been transfixed, the uterine arteries having been tied, the uterus together with the contained tumors was excised. The peritoneal surfaces were approximated in the median line over the pedicle. The abdominal cavity was then irrigated with sterilized salt solution at a temperature of 112° F. and a strip of iodoformed gauze was introduced into the cul-de-sac and brought out at the lower angle of the incision. The abdomen was finally closed after the usual manner and the usual dressings were applied. Patient made an uninterrupted recovery and is now perfectly well. The pain in the abdomen and in the leg of which she complained has disappeared, and the ulcerated varicose areas on the left leg have entirely healed.

It would seem probable that in this case the varicose condition of the veins of the left leg had resulted from pressure exerted by the tumor upon the vessels of the pelvis. If this is the case, it is to be expected that the removal of the obstruction will bring about a perfect cure. No specific treatment was applied to the ulcers, but since it is well-known that rest in bed by itself causes the ulcers for the time at least to heal spontaneously, it will be necessary to wait for some time to show whether or no the present improvement will be lasting.

